STATE OF SOUTH CAROLINA	256750
(Caption of Case)	~ • • • • • • • • • • • • • • • • • • •
Example: Application for a Classical	BEFORE THE
Example: Application for a Class C Charter Certificate from John Doe dba Doe's Limo	PUBLIC SERVICE COMMISSION
2003 Ettilo) 92 SOUTH CAROLINA
0000) TRANSPORTATION COVER SHEET
Appendion for new Charac C Charles	·
Goso C Charles	DOCKET NUMBER: 20/5 - 196 —
) If this is your first time filing an application with the PSC, you will not have filed with the PSC.
(Please type or print)	have a Docket Number. The Commission will assign one to you. If you and should be not a Docket Number. The Docket Number to you. If you and should be not a Docket Number.
Submitted by:	have filed with the Commission before, a Docket Number was assigned and should be entered above.
Submitted by: Robert metz	Telephone: 184318
Address: 4583 & walkerton 22	T0-37 822-3910
MB, 50 29579	- Fax:
	_ Other:
NOTE: The cover sheet and information contained by	= Email:
NOTE: The cover sheet and information contained herein neither repla as required by law. This form is required for use by the Public Service be filled out completely.	ces nor supplements the filing and service of the U
and out vice	Commission of South Carolina for the purpose of docketing and
NATURE OF ACTION	
	(Check all that apply)
NATURE OF ACTION Application - Class A/A Restricted Application - Class C Taxi	(Check all that apply) Request for Name Change on Certificate
Application - Class A/A Restricted Application - Class C Taxi Application - Class C Charter	(Check all that apply) Request for Name Change on Certificate Request to Amend Scope of Authority
Application - Class A/A Restricted Application - Class C Taxi Application - Class C Charter Application - Class C Charter	Request to Amend Scope of Authority Request to Amend Tariff (rate increase, etc.)
Application - Class A/A Restricted Application - Class C Taxi Application - Class C Charter Application - Class C Charter Bus Application - Class C Non-Emergency	(Check all that apply) Request for Name Change on Certificate Request to Amend Scope of Authority
Application - Class A/A Restricted Application - Class C Taxi Application - Class C Charter Application - Class C Charter Bus Application - Class C Non-Emergency Application - Class C Stretcher Van	Request to Amend Tariff (rate increase, etc.) Request to Amend Passenger Limit
Application - Class A/A Restricted Application - Class C Taxi Application - Class C Charter Application - Class C Charter Bus Application - Class C Non-Emergency Application - Class C Stretcher Van Application - Class E Household Goods	Request to Amend Scope of Authority Request to Amend Tariff (rate increase, etc.) Request to Amend Passenger Limit Request Exhibit
Application - Class A/A Restricted Application - Class C Taxi Application - Class C Charter Application - Class C Charter Bus Application - Class C Non-Emergency Application - Class C Stretcher Van	Request to Amend Scope of Authority Request to Amend Tariff (rate increase, etc.) Request to Amend Passenger Limit Request Exhibit
Application - Class A/A Restricted Application - Class C Taxi Application - Class C Charter Application - Class C Charter Bus Application - Class C Non-Emergency Application - Class C Stretcher Van Application - Class E Household Goods Application - Class E Hazardous Waste Application	Request for Name Change on Certificate Request to Amend Scope of Authority Request to Amend Tariff (rate increase, etc.) Request to Amend Passenger Limit Request Exhibit Late-Filed Exhibit Letter
Application - Class A/A Restricted Application - Class C Taxi Application - Class C Charter Application - Class C Charter Bus Application - Class C Non-Emergency Application - Class C Stretcher Van Application - Class E Household Goods Application - Class E Hazardous Waste Application Request for Extension to Comply with Order	Request for Name Change on Certificate Request to Amend Scope of Authority Request to Amend Tariff (rate increase, etc.) Request to Amend Passenger Limit Request Exhibit Late-Filed Exhibit Letter
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Application - Class A/A Restricted Application - Class C Taxi Application - Class C Charter Application - Class C Charter Bus Application - Class C Non-Emergency Application - Class C Stretcher Van Application - Class E Household Goods Application - Class E Hazardous Waste Application Request for Extension to Comply with Order Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded Request for Cancellation of Certificate	Request for Name Change on Certificate Request to Amend Scope of Authority Request to Amend Tariff (rate increase, etc.) Request to Amend Passenger Limit Request Exhibit Late-Filed Exhibit Letter Proposed Order Publisher's Affidavit Reservation Letter Response
Application - Class A/A Restricted Application - Class C Taxi Application - Class C Charter Application - Class C Charter Bus Application - Class C Non-Emergency Application - Class C Stretcher Van Application - Class E Household Goods Application - Class E Hazardous Waste Application Request for Extension to Comply with Order Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded	Request for Name Change on Certificate Request to Amend Scope of Authority Request to Amend Tariff (rate increase, etc.) Request to Amend Passenger Limit Request Exhibit Late-Filed Exhibit Letter Proposed Order Publisher's Affidavit Reservation Letter

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.



PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

101 Executive Center Drive, Suite 100
Columbia, South Carolina 29210
(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100

Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

	Date: 5/20/15
CLASS C - CHARTER	
Application is hereby made for a Certificate of F of S.C. Code Ann., § 58-23-10, et seq. (1976), and	Public Convenience and Necessity, in accordance with the provision and amendments thereto.
1. Name under which business is to be conducted (co	orporation, partnership, or sole proprietorship, with or without trade name.)
Transpor	tation LLC
4583 E. Walkerton	reet Address of Applicant 39579
St	reet Address of Applicant 39579
Mailing Address of	Applicant (if different from street address)
(843) 855-3212	Applicant (It different from street address)
(843) 855-3310 Phone	
	Fax
	Email Address Email Address
 If the Applicant is an LLC or a corporation, a c Secretary of State and the Articles of Incorpora Carolina Secretary of State "Foreign Corporation" 	copy of the Certificate of Existence from the South Carolina tion must be attached. (If incorporated outside of SC, attach South on" Certificate.)
3. Select Entity Type: (Check one)	
Individual Owner/Sole Proprietorship	
Partnership - List names and addresses of	all person having an interest in the hydrage.
Corporation - List names and addresses of	two principal officers
	1

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

BALANCE SHEET

	Balance at Time Application is Filed: Month Year
Assets:	
Cash	\ <u></u>
Receivables	1,500.00
Real Estate	
Buildings and Equipment (Net)	
Motor Vehicles (Net)	
Garage Equipment (Net)	
Machinery and Tools (Net)	
Supplies on Hand	
Prepaids and Other Assets	
Total Assets*	
	1,500.00
Liabilities and Equity:	
Accounts Payable	
Notes Payable	
Mortgages Payable	
Equipment Obligations	
Accrued Salaries and Wages	
Other Accrued Obligations	
Other Liabilities	
Total Liabilities	
Capital Stock	
Retained Earnings	
Total Equity	
Total Liabilities and Equity*	
Total Agests Total	1,500.00

^{*} Total Assets = Total Liabilities and Equity

PROPOSED RATES AND CHARGES FOR SERVICE

Proposed Rates and Charges (List only maximum charges per mile or trip, and/or hourly rate):

wed (sag 00.00) #

Requested Scope of Authority: Check all counties in which you are requesting permission to operate. You will only be allowed to operate in those counties checked below. You may request "Statewide" authority if you intend to operate in all counties in South Carolina. Abbeville Cherokee Florence Lee Saluda Aiken Chester Georgetown Lexington Spartanburg Allendale Chesterfield Greenville Marion Sumter Anderson Clarendon Greenwood Marlboro Union Bamberg Colleton Hampton McCormick | Williamsburg Barnwell Darlington Horry Newberry York Beaufort Dillon Jasper Oconee Berkeley Dorchester ___ Kershaw Orangeburg 2 Statewide Calhoun Edgefield Lancaster Pickens Charleston Fairfield ____ Laurens Richland

DESCRIPTION OF EQUIPMENT

You are not required to own a vehicle to file an application. However, prior to being issued a certificate by ORS, you will be required to have obtained a vehicle.

		Equipped to Carry: (The number o in the vehicle, including the driver)	s seatbelt.)
1-7 Pas	sengers, including driver		
1 8-15 PE	issengers, including driver		
MAKE	YEAR & MODEL	VIN#	EMPTY WEIGH
		LBD	WEIG

INSURANCE QUOTE

This form MUST BE COMPLETED AND SIGNED by an AUTHORIZED INSURANCE COMPANY REPRESENTATIVE. The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested. You will not be required to purchase insurance until your application has been approved and an order has been issued by the PSC. THIS IS ONLY A QUOTE.

The following insurance quote is for:		aug 1 V di	JU
Pit Bull Transpo	ortation i		
45000	rume of App	pplicant	
	Address of Ap	NB, SC. 29579 pplicant	
Amount of Premium:	L	Limits Quoted: (See Below)	
Liability Insurance \$ 3,500.0	1./1/	imits 300,000 CSL	
The above quoted premium is for a term	of <u>12</u> mo	onths.	-
Minimum Limits - Intrastate Only:			
V 15 D	0/50,000/25,000 0/100,000/25,000	* Passengers = Number of seatbelts in the vehicle including the driver's seatbelt	3,
Cause lous			
	Name of Insurance (Company	
P.O. BOX 7, B.	ome Office Address o	40 5	
Latti tamilian wikk at to the			

I am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

Authorized Insurance Company Representative's Signature

NOTICE:

If you wish to self-insure your motor vehicles for liability and property damage, you must comply with S.C. Code Ann. Sections 56-9-60 and 58-23-910. For more information, contact Vickie Coker with the Department of Motor

If you wish to apply as a self-insured for worker's compensation coverage in South Carolina you may do so with the South Carolina Worker's Compensation Commission (WCC) provided that you will be able to: 1) post a surety bond or letter-of-credit with the WCC for a minimum of \$500,000, 2) agree to pay a yearly self-insurance tax, and 3) agree to pay an annual assessment to the South Carolina Second Injury Fund. For more information, contact the WCC Self-Insurance Division at (803) 737-5712 or on the web at www.wcc.state.sc.us/self-insurance.

Exhibit Fit, Willing, and Able (FWA)

Pit Bro Transportation UC Name of Applicant	
1. Are there currently any outstanding judgments against the Applicant? O Yes If Yes, indicate nature of judgement(s) against applicant.	
2. Is Applicant familiar with all statutes and regulations, including safety regulations and gov carrier operations in South South Carolina, and does Applicant agree to operate in complia Olyces No	verning for-hire motor ince with these
 3. Is Applicant aware of the Commission's insurance requirements and the insurance premium Yes No 	costs associated

Exhibit on Driver Qualifications

1. Applicant understar	1ds that all drivers
Q Yes	nds that all drivers must be a minimum of 18 years of age. No
2. Applicant understand and such record from the maintained in the	ds that a certified copy of the driver's three (3) year driving record issued by the SC DMV at the DMV of the state in which the driver is or has been domiciled for such period must No
3. Applicant understands must be maintained in Yes	s that a criminal history background check from the state where the driver currently lives O No
4. Applicant understands their possession when constate of residence of the Yes	that all drivers operating a vehicle under a Class C Certificate must have in operating a charter vehicle, a valid driver's license issued by the SC DMV or the current O No
5. Applicant understands (I vehicles to drivers who a State Law Enforcement) Yes	nat all Class C Certificate holders are prohibited from employing or leasing are registered, or required to be registered, as sex offenders with the South Carolina Division or any national registry of sex offenders. No

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA POST OFFICE DRAWER 11649 COLUMBIA, SOUTH CAROLINA 29211

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Volume 26, S.C. Code Ann. Regs., 1976), and R.38-400 through R.38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Volume 23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

S.C. Code Ann. Section 58-3-250 states, in part, that every final order of the Commission must be served by electronic service, registered or certified mail, upon the parties to the proceeding or their attorneys.

Please check the applicable box:

The Applicant AGREES to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System. The Applicant authorizes the Commission to serve its orders by using the email address as it appears on page one of this Application. To sign up for eService notifications, please visit www.psc.sc. gov to create a My DMS account.

The Applicant DOES NOT AGREE to receive future Commission orders related to the Applicant's authority in South

The Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

Title of Applicant (e.g. President, Owner, etc.)

STATE OF SOUTH CAROLINA COUNTY OF House SWORN TO BEFORE ME th day of _____ Commission Expires

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

PIT BULL TRANSPORTATION LLC, A Limited Liability Company duly organized under the laws of the State of South Carolina on May 20th, 2015, with a duration that is at will, has as of this date filed all reports due this office, including its most recent annual report as required by section 33-44-211, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to section 33-44-809 of the South Carolina Code, and that the company has not filed a certificate of cancellation as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 20th day of May, 2015

Mark Hammon O

Mark Hammond, Secretary of State